CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 2 Total pages filed:					
3 CANDIDATE/ OFFICEHOLDER NAME	MS MRS MR FIRST MI Mr. Rodney W. NICKNAME LAST SUFFIX Bell	OFFICEUSE ONLY Date Received RECEIVER			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE / OFFICEHOLDER PHONE	ADDRESS (PO BOX APT (SUITE #: CITY. STATE ZIP CODE 3401 Chisholm Trail Salado TX 76571 AREA CODE PHONE NUMBER EXTENSION (254) 493-8426	8:07 a.m. APR 0 3 2019 By Conatle Postmarked City Secretary Date Hand-delivered or Date Postmarked			
6 CAMPAIGN TREASURER NAME	MS MRS MR FIRST MI Mr. Rodney W. NICKNAME LAST SUFFIX Bell	Rece pi P Amount 5 Date Processed April 3, 2019 Date Imaged April 3, 2019			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE) APT SUITE # CITY STATE. 3401 Chisholm Trail Salado TX	76571			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (254) 493-8426				
9 REPORT TYPE	January 15 X 30th day before election Runoif July 15 8th day before election X Exceeded \$500 limit	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C.OH - FR)			
10 PERIOD COVERED	Month Day Year Month O1 01 2019 THROUGH 03	Day Year 31 / 2019			
11 ELECTION	ELECTION DATE Month Day Year Primary Runoll Other Description 5 4 2019 X General Special				
12 OFFICE	OFFICE HELD (il any) 13 OFFICE SOUGHT (il known Alderman				
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME			15 Filer ID (Ethics C	ommission Filers)		
Rod						
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE! OFFICEHOLDER, THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION DILLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
	COMMITTEE TYPE	COMMITTEE NAME	-			
	GENERAL					
	SPECIFIC	COUMITTEE ADDRESS				
		COMMITTEE CAMPAIGN TREASURER NAME				
Additional Pages						
	·	COMMITTEE CAMPAIGN TREASURER ADDRESS				
17 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THES.)		0.00		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	0.00		
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS.	\$	0.00		
	4. TOTAL	POLITICAL EXPENDITURES	\$	616.48		
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST ORTING PERIOD	DAY \$	0.00		
OUTSTANDING LOAN TOTALS	6. TOTAL I LAST D	THE \$	0.00			
18 AFFIDAVIT						
I swear, or affirm, order penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Notory Public, State of Texos Comm. Expires 07-06-2019 Notory ID 124381178 Signature of Candidate or Officeholder						
Sworn to and subscribed before me, by the said Rockney W. Bell , this the 3rd day of April , 20 19 , to cortify which, witness my hand and seal of office.						
Care Westerbland Care McPartland Notary Public. Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath						

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

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SUBTOTAL AMOUNT
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\$
\$
\$ 616.48
\$
\$
\$
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Event Expense Foes Food Beverage Expense Gltt/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Poling Expense Printing Expense

Salarles/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District
Travel Out Of District

Candidate/Officeholder/Political Committee Legal Services Other (enter a category not fisted above) The instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 1 Rodney W. Bell 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 0.00 6 Payee name March 28, 2019 M &D Graphics and Printing 7 Amount (\$) 8 Payee address City; State; Zip Code 4311 South 31st, STE 150 Temple, TX 76502 616.48 TYPE OF **Political** Non-Political EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE Check If travel outside of Texas. Complete Schedulo T. **Advertising Signs** OF EXPENDITURE Check It Austin, TX, officeholder living expense 11 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Rodney W. Bell Alderman Date Payee name Amount (\$) Pavee address: City; State; Zip Code TYPE OF Political Non-Political EXPENDITURE Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule Ti PURPOSE OF Check if Austin, TX efficeholder living expense EXPENDITURE Complete ONLY If direct Candidate / Officeholder name Office sought Office held expanditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED